



## LIBYA

### ABOUT LIBYA VACCINATIONS

Located in northern Africa, Libya borders the Mediterranean Sea on the north and Niger and Chad on the south. The warmest months are July and August, when average monthly temperatures range from 22-29°C in the desert to 17-30°C along the coast. The coolest months are January and February, when average temperatures range from 10-17°C in the desert to 8-16°C along the coast. Annual rainfall is about 38 cm per year along the coast, while rainfall decreases to about 26 cm per year inland.

#### OVERALL RISK

Medium Risk - Preventable disease occur sporadically or at moderate levels. Consult a Travelvax clinic for your specific risk if travelling outside resorts, 5 star accommodation or for periods longer than a few days.

#### MALARIA RISK

No risk to travellers.

### VACCINE PREVENTABLE DISEASES

#### YELLOW FEVER

No requirement

#### COVID-19

For the most up to date requirements for entry into Australia, go to [Smartraveller](#).

Please click this [COVID-19 Travel Regulations Map](#) (IATA) to view the latest Libya COVID travel requirements.

#### HEPATITIS A

Moderate risk to travellers, vaccination recommended.

#### HEPATITIS B

Moderate presence of Hepatitis B in local population. Vaccination would be recommended.

#### TYPHOID

Moderate risk for most travellers. Vaccination recommended for travel to smaller cities, villages and rural areas outside usual tourist routes. Some medical conditions pre-dispose to infection; whether vaccinations would be recommended should be discussed with a medical practitioner. Consult a medical practitioner for your specific risk.

## INFLUENZA

Northern hemisphere winter risk (November to April). Most common vaccine preventable illness in travellers. Vaccine recommended, effective for 1 year.

## RABIES

Disease present. Recommendation for vaccination will depend on specific itinerary and activities planned. Generally rabies vaccination is advised for high risk individuals such as veterinarians or animal handlers, cavers. Additionally for higher risk travellers who plan: extended periods outdoors, rural travel, adventurous activities including bicycling; also expats or long-term travellers to endemic regions and children (risk of more severe or risk-prone bites and may not report contact at all).

## JAPANESE ENCEPHALITIS

No risk to travellers.

## POLIO

No risk to travellers.

## TICKBORNE ENCEPHALITIS

No risk to travellers.

## MENINGOCOCCAL MENINGITIS

Low risk to travellers.

### Other country requirement(s) (2022)

Proof of vaccination against meningococcal meningitis and seasonal influenza required for departing travellers in the context of Hajj.

## CHOLERA

No risk to travellers.

## OTHER DISEASES

### TRAVELLERS DIARRHOEA

Moderate risk. Travellers' Diarrhoea affects 20-60% of overseas travellers, food and water precautions are essential. Self-treatment medications may be recommended.

### INSECT-BORNE DISEASES

Diseases such as [Dengue](#), [Chikungunya](#), [Zika](#) may be present. Seasonal risk will vary by country. Whether preventive measures will be recommended will depend on itinerary, length of stay, type of travel etc. and needs to be discussed with a medical practitioner. For those countries with disease present, risk is highest in urban and semi-urban areas, but may also occur in rural areas; [insect avoidance measures](#) are highly recommended all year round. Travelvax believes that the best defence is to understand their habits, dress properly and use an [effective insect repellent](#) in the correct manner. Consult a medical practitioner for your specific risk.

## SCHISTOSOMIASIS

Swimming or bathing in freshwater is the main cause of infection. Avoid freshwater contact if you are unsure of origin.

## STIs

Sexually transmitted and blood-borne diseases occur. The risk to travellers can be greatly reduced by practising safe sex with any new partner. All travellers should carry condoms. Blood borne diseases (HIV, Hepatitis B & C) can be spread by blood transfusion, tattooing, body piercing or non-sterile needles. Travellers in high risk groups should carry sterile needles (see also Medical Care).

## ALTITUDE

Altitude illness is a risk to travellers ascending higher than 2000 meters. Preventative medication is available. Consult a medical practitioner if ascending to 2000 metres or above.

## ADDITIONAL INFORMATION

### PERSONAL SAFETY

In order to check before and during travel for any high-risk areas visit the Smartraveller website. Avoid unnecessary displays of wealth or valuables and minimise the amounts of cash carried. Keep secure records of passport/credit card/licence numbers. For more safety tips visit: [www.smartraveller.gov.au](http://www.smartraveller.gov.au).

### MEDICAL CARE

Comprehensive medical facilities available only in the major population centres and/or specific private clinics. Sterile surgical products (syringes/needles/sutures) are not always available. Check for any contacts supplied by your emergency assistance organisation (nominated by your travel insurer) or with IAMAT (International Association of Medical Assistance for Travellers).

### FIRST AID KITS & ACCESSORIES

Always carry an [advanced first aid kit](#), including needles and syringes (shortages of sterile equipment are common). A prescription kit (containing treatments for travellers' diarrhoea) is essential. A [mosquito net](#) and [insect repellent](#) (containing DEET, Citriodiol or Picaridin) are highly recommended, even if anti-malarials are taken.

**More information on Libya is available during your pre-travel consultation with Travelvax.  
Call 1300 360 164 for the location of the clinic nearest to you.**